## The Commonwealth of Massachusetts

## **State Examiners of Electricians**

239 Causeway Street • 5th Floor • Boston, Massachusetts 02114

To the State Examiners of Electricians: In connection with my application for examination for a journeyman electrician/ Systems technician license, I submit the following certificate to vouch for my statements as to my experience.

(Signature of Applicant)	(Address)		(Date)
The fo	ollowing information is to be	filled out by the lic	ensed electrician.
To the State Examiners of Electr Massachusetts, I hereby subscribe			ion 5 of Chapter 141 of the General Laws of
		- (	)-
(Name of Applicant)		(Telephon	) e Number)
(Please Print) in his application for examination	for a journeyman electrician/S	Systems technician I	icense that he was employed by:
(Name of Employer)	nployer) (Address of Employer)		
from//19 * to (Date of Employment)	)/19 * <u>Separate</u> (Date of this Certificate or Da	sheets must be conte of Termination)	npleted for each date range.
in the capacity of			
. ,	(Electrician's Apprentice, He	Iper of other Rating	
and that this employment amount	ed to a total accumulated time	e ofyears ar	nd hours***
of work for which a license is journeyman/systems technician. (	(f) on a (please check one) full required by law, and was (If work was "part-time" expl lates stated above including na	performed under ain in detail on the	time basis and% consisted the direct personal supervision of licensed reverse side of this sheet listing all positions dates.) Can you produce payroll records for
		by	
(Name of Applicant's Employer)		(Sigr	nature of Licensed Professional)
Holder of License No(Type C	Holde	er of License No	
(Type C	lass and No.)		(Type Class and No.)
(		()	<del>-</del>
Telephone Number		Telephone Nu	ımber
	GENERAL LAWS, TE	ER. ED. CHAPTER 14	11

Section 9. Any person applying for a journeyman/technician license and making any misstatement as to his experience or other qualifications, or any person, firm or corporation subscribing to or vouching for any such misstatement, shall be subject to the penalties set forth in Section 5. (A fine of not less than ten or more than one hundred. Subsequent offenses. A fine of \$50 to \$500 or imprisonment for six months or both.)

THIS FORM IS TO BE USED IN ALL CASES FOR CERTIFYING PRACTICAL EXPERIENCE. ADDITIONAL FORMS WILL BE MAILED UPON REQUEST.

\*\*\* Please show actual breakdown of overtime hours on reverse side of this employment form is submitting proof of experience on an hourly basis, such as the month, day, year and actual working hours being certified to towards the 8,000- hour requirement.